

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax (571) 273-2885**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where indicated. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21302 7590 08/29/2005

**KNOBLE, YOSHIDA & DUNLEAVY**  
**EIGHT PENN CENTER**  
**SUITE 1350, 1628 JOHN F KENNEDY BLVD**  
**PHILADELPHIA, PA 19103**

11/21/2005 MBELETE2 00000057 10058622

01 FC:1501 1400.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 9.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Natalie Sorrentino (Depositor's name)  
Natalie Sorrentino (Signature)  
November 14, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/058,622	01/28/2002	Charles Achim Bernard Boucher	DVME-1014USCON1	4855

**TITLE OF INVENTION:** METHOD FOR EFFECTING COMPUTER IMPLEMENTED DECISION-SUPPORT IN THE SELECTION OF THE DRUG THERAPY OF PATIENTS HAVING A VIRAL DISEASE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	11/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
ZHOU, SHUBO	1631	702-019000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**Knoble Yoshida & Dunleavy, LLC**

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**F. Hoffman-LaRoche Ltd.****The Netherlands**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 3

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50 0462 (enclose an extra copy of this form).

**5. Change in Entity Status (from status indicated above)**

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date **November 14, 2005**Typed or printed name **Kevin J. Dunleavy**Registration No. **32,024**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)**  
**(37 C.F.R. 1.311)**

Docket No.  
**DVME-1014USCON1**

Applicant(s): **CHARLES BOUCHER**

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/058,622	01/28/2002	SHUBO ZHOU	21302	1631	4855

**INVENTION METHOD FOR EFFECTING COMPUTER IMPLEMENTED DECISION-SUPPORT IN THE SELECTION OF THE DRUG THERAPY OF PATIENTS HAVING A VIRAL DISEASE**

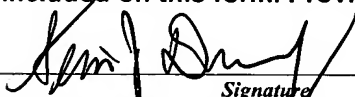
NOV 18 2005

Mail Stop Issue Fee  
**COMMISSIONER FOR PATENTS**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 1400.00 ☐ Design Fee: \_\_\_\_\_ ☐ Plant Fee: \_\_\_\_\_
- ☒ Publication Fee: \$ 300.00
- ☒ A check in the amount of \$1,709.00 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 50-0462 as described below.
- ☐ Charge the amount of \_\_\_\_\_
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

  
Signature

Dated: **NOVEMBER 14, 2005**

**KEVIN J. DUNLEAVY; REG. NO. 32,024**  
**KNOBLE YOSHIDA & DUNLEAVY, LLC**  
**EIGHT PENN CENTER, SUITE 1350**  
**1628 JOHN F. KENNEDY BOULEVARD**  
**PHILADELPHIA, PA 19103**

CC:

**Certificate of Transmission by Facsimile**  
This certificate may only be used if paying  
by deposit account.

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States and Trademark Office (Fax No. \_\_\_\_\_) on \_\_\_\_\_

(Date)

Signature

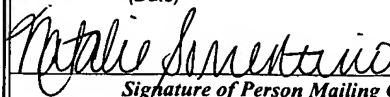
Typed or Printed Name of Person Signing Certificate

**Certificate of Mailing by First Class Mail**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on \_\_\_\_\_

**NOVEMBER 14, 2005**

(Date)

  
Signature of Person Mailing Correspondence

**NATALIE SORRENTINO**

Typed or Printed Name of Person Mailing Correspondence